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ON THE COVER

(main photo)

Veteran Jerry Wimer and Dr. George Tzanis monitor Mr. Wimer's weight. PHOTO COURTESY OF WILMINGTON VA MEDICAL CENTER

(upper inset)

Dr. Carla Spagnoletti discusses women's health with veteran Carolyn Crawford, as Dr. Patty Hayes looks on. PHOTO COURTESY OF VA PITTSBURGH HEALTHCARE SYSTEM

(lower inset)

Pharmacist Sheila Lee provides medication guidance to veteran Gregory Mills.

PHOTO COURTESY OF COATESVILLE VA MEDICAL CENTER

Veterans First is a health care publication of the VA Stars & Stripes Healthcare Network. The publication is intended to provide information to help you stay well, manage your health care, and learn about health services available through VA. It is not intended as a substitute for professional medical advice, which should be obtained from your doctor.

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Publication date: March 2005

DIRECTOR

Addressing the Needs of our Returning Service Members

Dear Veterans,

The onset of
Operation Iraqi
Freedom and
Operation Enduring
Freedom has
brought changes to
VA health care
facilities across the
country and here in
the VA Stars &
Stripes Healthcare
Network.

After primarily providing care to veterans of the Gulf, Vietnam,



Ms. Szabo and Coatesville VA Medical Center Director Gary Devansky with returning employee veterans.

Korean, and World Wars, Network medical centers and community-based outpatient clinics have now also been addressing the needs of our newest returning service members. In fact, our facilities have already treated over 1,700 of these veterans.

In our effort to meet this responsibility in the best way possible, we formed the "Returning Service Members Workgroup" in 2003. This group, comprised of representatives from each of our 10 medical centers, meets regularly to address the current and anticipated future needs of veterans returning from Iraq, Afghanistan, and other theaters of operation. One outgrowth of these meetings is that we have established a point of contact and a case manager at each medical center to assist the returning veterans as they come to VA for care.*

One final note: I am proud to say that among those who have served overseas the past few years are nearly 100 Network employees. From file clerks to food service workers to nurses, these brave men and women are part of the many who are risking their lives for our nation, and we thank them for their sacrifices.

* To learn more about services and benefits available to the returning veterans, including the points of contact at our medical centers, please visit our Web site at www.starsandstripes.med.va.gov

Charleen R. Szabo, FACHE

Charlee Rosel

Network Director

Controlling Diabetes

WITH THE HELP OF YOUR VA HEALTH CARE TEAM

iabetes has reached near epidemic levels in America. The Veterans Health Administration says that the disease is even more widespread among veterans treated at VA facilities than among the general population. Because of this, VA places a strong emphasis on diabetes management and care.

According to George Tzanis, MD, primary care provider at the Wilmington VA Medical Center (VAMC), the overall goal in managing diabetes is to keep blood glucose (sugar) levels in a normal range, avoiding extreme highs and lows. Uncontrolled, diabetes can cause damage to the nerves, eyes, blood vessels, and kidneys. The key is to find the right balance between diet, exercise, and medication, and to maintain a healthy weight.

At the Wilmington VAMC, newly diagnosed diabetes patients attend a series of classes to learn about the disease and what they can do to control blood glucose levels. "Education is the most important medicine we have in taking care of patients with diabetes," says Dr. Tzanis.

Because diet and weight are so important, diabetes patients there work closely with a nutritionist to develop an eating plan. They learn how foods change the level of glucose in the blood, and how to coordinate diabetes medications with diet and exercise. In addition to the nutritionist, the team of health care professionals who help diabetes patients manage their disease and maintain

good health includes the primary care provider, a diabetes educator, a podiatrist, an optometrist, a physical therapist and sometimes a clinical pharmacologist.

Recent studies, such as one reported last year in the *Annals of Internal Medicine*, have shown that VA's care of diabetes patients is successful mainly because of clinical practice guidelines for preventive care. The guidelines set a minimum for how often a patient should receive certain exams and tests, such as the hemoglobin A1C test, which gives providers a look at the patient's average blood glucose levels over time. The A1C test shows how well the patient's diet and treatment plan are working. VA guidelines call for the A1C at least once per year, or as often as the primary care provider thinks is necessary.

In addition, because people with diabetes are about twice as likely to get cardiovascular disease as most people, VA providers keep close watch on blood pressure, cholesterol levels, weight, and body mass index. "Blood sugar is only one facet of this disease," says Dr. Tzanis. "Blood pressure and cholesterol are as important and sometimes harder to control."

With this information – and data from other preventive measures – providers monitor the patient's overall health, which in turn can help the patient avoid future complications.

Living with diabetes is a challenge, but one that can be met by maintaining a proper diet, getting exercise, and working closely with your VA health care team.

One Seaman's Experience



Dr. George Tzanis attends to veteran Jerry Wimer's foot.

avy veteran Jerry Wimer was diagnosed with type 2 diabetes fifteen years ago at the age of 40. Wimer, a patient at the Wilmington VA Medical Center, faced a couple of challenges in his battle to manage diabetes. Having lost a leg in a car accident, Wimer's exercise choices were limited. In addition, he was overweight.

Then, about six years ago, he made a life-changing decision: he decided to shed some excess pounds. "I listened to Dr. Tzanis telling me about the dangers and complications of diabetes. My sugar levels were out of control. I just decided I wanted to lose weight," says Wimer.

Working with a VA nutritionist, Wimer started a weight loss program and began to exercise on a regular basis. "Over 10 months I lost 96 pounds. My blood pressure came down and my diabetes became easier to manage," he says.

Wimer continues to exercise, and he has not regained any of the weight he lost. As a result, his checkups at the Wilmington VAMC have been cut back from three times a year to two.

VA Expands Health Care for Women

he number of women in the military is steadily increasing. In 1973, when President Richard Nixon put an end to the draft, the U.S. military began to recruit women to help fill the ranks of the new volunteer armed forces. Military jobs that were previously held only by men became available to women.

As a result, when the Gulf War began almost two decades later, 12 percent of those who served on active duty were women. Today, nearly 15 percent of the forces serving in Operation Iraqi Freedom and Operation Enduring Freedom are women.

In response, VA established the Women Veterans Health Program (WVHP) in the early 1990s to oversee the creation and expansion of health care services for women at VA medical centers. At each of the ten medical centers in the VA Stars & Stripes Healthcare Network, there is now a women veterans program manager. Through the WVHP, the program managers work together to plan for the health care needs of women, then provide oversight

to be sure the needs are met. Patty Hayes, Ph.D., the lead women veterans program manager for the Network, says that "It's a group of people paying attention (to women's needs) and to the care that's being given."

For example, through the WVHP, providers are educated to deal with health care issues which are complex for women, such as heart health, diabetes, weight problems, and fibromyalgia, as well as birth control, menopause, and osteoporosis. They are also trained, Dr. Hayes says, to "understand the female in-

service experience," an experience that may include sensitive mental health matters, such as sexual trauma and violence.

The WVHP also addresses changes that may need to be made in the medical centers themselves. "Many of the older buildings were not built to serve women," says Dr. Hayes. Changes to provide privacy and

dignity for all veterans and to accommodate females in exam rooms and bathrooms are taking place. (See related news item about our VA medical center in Clarksburg, WV on page 7.)

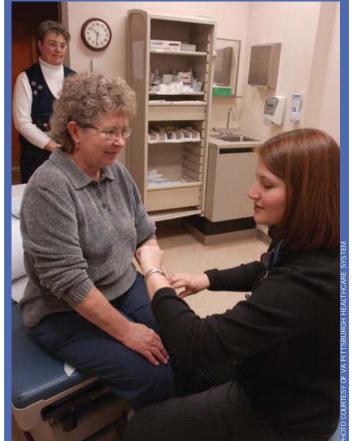
Dr. Hayes says the overall goal is to offer women a "one-stop shop" at VA medical centers for all of their health care and to ensure they're informed of their benefits. "Not only can they get their primary care at our medical centers, but they can also get their gender-related care, usually during the same visit."

Today, Network medical centers and clinics are also addressing the needs of the returning service women from Operations Iraqi Freedom and

Enduring Freedom. According to Dr. Hayes, 20 percent of the women veterans who served in these operations have already come to VA for care.

"If a woman hasn't been to VA in awhile, she'll see a change – she'll see more women. She won't feel so alone," says Dr. Hayes.

To learn more about health care services for women, contact the women veterans program manager at your nearest VA medical center. For a listing of the names of each facility's program manager, visit the Network Web site at www.starsandstripes.med.va.gov.



Dr. Carla Spagnoletti takes the pulse of veteran Carolyn Crawford, as Dr. Patty Hayes looks on.

Unable to Keep Your Appointment? Don't Be a "No Show" - Let us Know!

VA medical centers face many challenges in their efforts to improve veterans' access to care and shorten waiting times. One of these challenges is the high rate of "no shows." A no show happens when a veteran fails to keep a scheduled appointment and doesn't notify the facility ahead of time. In some medical centers, as many as two

or three no shows occur for every five appointments!

According to Dawn Staph, administrative coordinator for primary care at the Butler VA Medical Center. no shows are missed opportunities. That's because the facility loses the opportunity to provide care to the intended veteran, and it's too late to schedule another patient in the vacant appointment slot.

Unfortunately, this can also result in some veterans (whether they are no shows or not) having to wait longer to get their appointments.

There are many reasons for not keeping an

appointment, including transportation problems, weather, family emergencies, and simply not remembering. A

patient may have also tried to call the medical center to cancel an appointment, Don't Be a "No-Show"

but was not sure who to notify or was unable to get through to someone.

Our facilities are seeking this kind of information from veterans and working to improve things on our end that may contribute to no shows. This includes making sure patients know who to call if they can't keep an appointment, sending reminder notices, and placing reminder phone calls. But, we need your help, too! If you find you won't be able to keep an appointment, notify the medical center as soon as possible. If

there are things we are doing that result in you being a no show, tell us so we can change them. In short, please help us help you and other

veterans by not being a no show!



We Need YOU to Help!

Please help us by

always calling to cancel at least

24 hours in advance if you

cannot keep your scheduled

appointment.

A's policy on generic drugs is to use them as often as possible, yet many veterans still have concerns about generic medications. What exactly is a generic drug? Are they as strong and safe as brand-name drugs? Why do generic drugs look different?

"A generic drug is almost a copy of the brand-name product," says John Lowe, pharmacy benefits manager for the VA Stars & Stripes Healthcare Network.

According to the U.S. Food and Drug Administration (FDA), when the patent protection of a brand-name drug expires (a patent lasts 17 years), drug makers are allowed to make the drug and sell it under a name other than the brand name. However, because of U.S. trademark laws, the generic cannot be an exact copy of the brand, so certain inactive ingredients, such as colors or flavorings, may be different. These ingredients do not affect the way the drug works.

The generic version is just like the brand-name one in dosage, strength, performance, and use. It must meet

the same quality and standards as the brand, and must be reviewed and approved by the FDA before it can be placed on the market.

The biggest difference between a brand-name medication and its generic counterpart is the cost, says Lowe. Because generic drug makers don't have to make the drug from scratch (the brand-name drug maker has already developed the "recipe"), it costs much less to produce and put the generic version on the market. For this reason, says Lowe, the VA dispenses generics to veterans whenever they can, "This allows us to take care of more veterans with the same amount of money."

Dr. Glenn Snider, chief of staff at the Louis A. Johnson VA Medical Center in Clarksburg, W. Va., says patients are more aware of brand-name drugs because of advertising, but should be assured that the generic versions are just as effective. "Once the generic drug receives approval by the FDA, veterans can be sure that the effectiveness of the generic is the same as the brandname version."



Outpatient

Pharmacy

What are COX-2 drugs, and what is VA's position on using them?

Nonsteroidal anti-inflammatory drugs (NSAIDs), such as ibuprofen, are used to treat the pain and inflammation of arthritis. In some people, however, they can cause stomach irritation, at times leading to ulcers and bleeding. The COX-2 drugs (sold as Vioxx, Celebrex, and Bextra) are also NSAIDs, but were developed to be easier on the stomach.

Recently, Vioxx was voluntarily withdrawn from the market after studies found that the drug was linked to an increased risk of heart attack and stroke.

According to Dr. Chester B. Good, primary care physician at the VA Pittsburgh Healthcare System and

chairman of VA's National Medication Advisory Panel, VA has long been concerned about COX-2 drugs. "VA has been very cautious in prescribing the COX-2 drugs and has been giving them only to patients at high risk for stomach problems." Dr. Good says only about five percent of arthritis patients within the VA Stars & Stripes Healthcare Network have been prescribed a COX-2 drug. All patients that were prescribed Vioxx were informed of the withdrawal from the market, and their physician has selected an alternative medication for them.

While the U.S. Food and Drug Administration monitors the

remaining COX-2 drugs on the market, VA will continue to be cautious, says Dr. Good. "There are safe alternatives to the COX-2 drugs for arthritis patients with sensitive stomachs," he says.

Why can't I just get my medications at VA?

There are two reasons why veterans can't come to VA for prescription medications without seeing a VA primary care provider.

According to Dr. David Macpherson, who chairs the VA Stars & Stripes Healthcare Network's Primary Care Committee, the first reason is because it is against the law. The law prohibits VA from filling the prescriptions of private physicians except for a few, limited situations. VA providers are also prohibited from re-writing prescriptions from private physicians without examining and treating the patient. For example, it would be prohibited for a VA provider to prescribe medications for

high blood pressure without evaluating the patient for that condition.

The second reason, says Dr. Macpherson, is patient safety. Veterans on several medications are at risk for drug interactions. Although a VA provider may be treating you for only one of your health concerns, he or she must be made aware of any medications prescribed by your private physician. In this way, serious drug interactions can be avoided.

Is the Network doing any research that could benefit veterans with hearing loss?

At the VA Pittsburgh Healthcare System's (VAPHS) audiology research laboratory, ongoing studies on

hearing loss and hearing-related disorders are routinely conducted. For example, past research has focused on learning how hearing aids contribute to a veteran's wellbeing and quality of life.

According to Sheila Pratt, Ph.D., research audiologist in the Geriatric Research, Education, and Clinical Center at VAPHS, a research program is currently underway to learn the effects of hearing loss on veterans who suffer from aphasia. (Aphasia is a condition in which a person has difficulty producing and understanding language because of a brain injury.) Many times health care providers aren't able to tell how much of an aphasia

Veteran Gregory Mills discusses his medicine with pharmacist Sheila Lee.

of a brain injury.) Many times health care providers aren't able tell how much of an aphasia

VA will continue to patient's struggles to communicate are due to aphasia, hearing loss, or a combination of both.

"The most important information we eventually hope to learn is how we might best correct hearing loss in people with aphasia," says Dr. Pratt. Currently many veterans with aphasia, not previously diagnosed with hearing loss, are treated as though they have no hearing problems.

Dr. Pratt says the outcome of this study could underscore how important it is for a patient with

aphasia to wear his or her hearing aid(s), and for that veteran's family to let providers know that their loved one has hearing loss.

VOLUNTEERS NEEDED Please contact your

nearest VA medical center or visit our Web site for more information.



Veterans Update News You Can Use

Partnerships Improve Care at Butler VA **Medical Center**

Since 1998, the Butler VA Medical Center (VAMC) has partnered with community service agencies as a way to improve veterans' health care while making use of areas on the medical center campus that were not fully utilized. Lease agreements with these agencies generate revenue that is used to support veterans' care. The partnerships-- which are consistent with the CARES (Capital Asset Realignment for Enhanced Services) program-- also enable the Butler VAMC to provide quality care, add new services, and work more closely with the community.

Deshon Place, operated by the Butler County Housing Authority, is one such partnership. It is a 10bed facility, previously unoccupied, that now provides a program for the homeless. Other community partners include United Way of Butler County, Suit Yourself, Lifesteps, Inc., Midwestern Intermediate Unit, and the Gaiser Addiction Center.

The newest partnership involves a lease agreement with Butler County to build a 16-bed, intermediate care psychiatric facility on some unused Butler VAMC property. The Butler County Interim Mental Health Facility is scheduled to open later this spring.

Refurbished Clinic Provides Health Care for Women Veterans at the Louis A. Johnson VAMC

The Louis A. Johnson VA Medical Center in Clarksburg, W. Va., will unveil its refurbished women's health care clinic this spring. The clinic will be an attractive, private, and comfortable state-of-the-art facility for the more than 500 women veterans who are patients at the VAMC. Tommy Turner, M.D., a full-time, board-certified gynecologist with surgical privileges, will be the clinic director.

Services offered by the clinic will include bone density scans, osteoporosis evaluation and treatment,

Pap smears, mammograms, surgical services, and breast and cervical cancer screening. In addition, reproductive health care services (including maternity care and infertility evaluation) and counseling services for sexual trauma, domestic violence, and other mental health issues will be offered. Routine preventive health screenings and referrals to primary care, optometry, cardiac care, and other specialties will also be available at the new clinic.

Joint Commission Announces Medical Center Accreditation Surveys

The Joint Commission on Accreditation of Healthcare Organizations will conduct unannounced accreditation surveys of the medical centers in the VA Stars & Stripes Healthcare Network during 2005. The purpose is to evaluate the medical centers' compliance with nationally established Joint Commission standards. The survey results will be used to determine whether accreditation should be awarded to each medical center and, if so, under which conditions.

Joint Commission standards deal with organizational quality-of-care issues and the safety of the environment in which care is provided. Anyone believing that he or she has pertinent and valid information about such matters may contact the Joint Commission. Mail, fax, or e-mail your comments to:

Division of Accreditation Operations Account Representative Joint Commission on Accreditation of **Healthcare Organizations** One Renaissance Boulevard Oakbrook Terrace, IL 60181 Fax: 630-792-5636

E-mail: complaint@jcaho.org

For more details on these and other VA health care developments, please visit our Web site or call your nearest VA medical center. (See back cover for telephone numbers.)

SERVING YOU VA Stars & Stripes **Healthcare Network**

Here's one good reason to get to know the facilities that make up the VA Stars & Stripes Healthcare Network: You are our top priority! Dedicated to serving veterans living in Pennsylvania, Delaware, and areas of West Virginia, Ohio, New Jersey, and New York, the Network offers comprehensive services ranging from preventive screenings and checkups to long-term care. At our 10 medical centers and over 40 freestanding outpatient clinics, teams of skilled health care professionals - including specialists in substance abuse, prosthetics, and posttraumatic stress disorder - are committed to your health and well being.

Do you know a veteran who, after returning from the service, has continued to make an important contribution to the lives of others, his or her community, or our country (e.g., in the fields of science, medicine, the arts, etc.)? If so, please write and tell us about this Vital Veteran. Please include a paragraph telling us why you are nominating this veteran. Include specific

instances of what he or she is doing to better the lives of others. Be sure to include your address and telephone number in case we need to reach you.

Mail to: "Vital Veteran" **VA Stars & Stripes Healthcare Network Delafield Road** Pittsburgh, PA 15240

The Latest Information for Veterans on Our Web Site

Any time you need it, you can find accurate and timely news and information for veterans by visiting the VA Stars & Stripes Healthcare Network Web site at www.starsandstripes.med.va.gov

Recent updates to the site include:

- the names of our designated facility points of contact to assist returning service members;
- a list of the Network's behavioral health programs, and which are located at each of the ten medical centers;

www.starsandstripes.med.va.g

♦ a link to the U.S. Department of Labor site, "Hire Vets First," which is designed to help employers find qualified veterans, and help veterans make the best use of a national network of employment resources.

If you don't have access to the Internet at home or at the home of family or friends, check with your local library. Many libraries offer Internet access free-of-charge to the public.

VA Stars & Stripes Healthcare Network Medical Centers

ALTOONA - James E. Van Zandt VA Medical Center

2907 Pleasant Valley Blvd • Altoona, PA 16602-4377 (814) 943-8164 or 1-877-626-2500 (toll free)

BUTLER VA Medical Center

325 New Castle Road • Butler, PA 16001 (724) 287-4781 or 1-800-362-8262 www.va.gov/butlerva

CLARKSBURG - Louis A. Johnson VA Medical Center

One Medical Center Drive • Clarksburg, WV 26301 (304) 623-3461 or 1-800-733-0512

COATESVILLE VA Medical Center

1400 Black Horse Hill Rd • Coatesville, PA 19320-2096 (610) 384-7711 or 1-800-290-6172 www.coatesville.med.va.gov

ERIE VA Medical Center

135 East 38 Street • Erie, PA 16504 (814) 868-8661 or 1-800-274-8387

LEBANON VA Medical Center

1700 South Lincoln Ave. • Lebanon, PA 17042 (717) 272-6621 or 1-800-409-8771

PHILADELPHIA VA Medical Center

University and Woodland Avenues Philadelphia, PA 19104 (215) 823-5800 or 1-800-949-1001

PITTSBURGH - VA Pittsburgh Healthcare System

1-866-4VAPITT or 1-866-482-7488

University Drive Division
University Drive • Pittsburgh, PA 15240
Highland Drive Division
7180 Highland Drive • Pittsburgh, PA 15206
H. John Heinz, III Progressive Care Center

Delafield Road • Pittsburgh, PA 15240 www.va.gov/pittsburgh

WILKES-BARRE VA Medical Center

1111 East End Boulevard • Wilkes-Barre, PA 18711 **(570) 824-3521 or 1-877-928-2621** (toll free) www.va.gov/vamcwb

WILMINGTON VA Medical Center

1601 Kirkwood Highway • Wilmington, DE 19805 (302) 994-2511 or 1-800-461-8262

Important Notice:

Reporting a Change of Address or Death

Veterans First is mailed to veterans who have received care at Network facilities over the past two years, and to other veterans who have indicated interest in receiving the newsletter. If you have a change of address – or need to report the death of a veteran who had been receiving *Veterans First* – please call the toll-free number of the medical center that has provided your care (or the care of the deceased veteran) and give them this information. Phone numbers are listed in the center of this page. By doing this, we hope to avoid sending the newsletter to the wrong location or to the family of those who have lost loved ones. If you are receiving compensation or pension benefits, but have not had any appointments at these medical centers, you may contact our network office (at the Pitts-

burgh, Pa. address shown below) to provide updated information.



VA Stars & Stripes Healthcare Network

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